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Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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|  |                        |                          |
|--|------------------------|--------------------------|
| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence after initial filing)</i> | Application Number     | 09/554,960               |
|  | Filing Date            | May 22, 2000             |
|  | First Named Inventor   | Kaslow, David <i>758</i> |
|  | Group Art Unit         |                          |
|  | Examiner Name          |                          |
| Total Number of Pages in This Submission   | Attorney Docket Number | 015280-342100US          |

| ENCLOSURES (check all that apply)   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment / Response<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Renewed Petition Under 37 CFR 1.181 and 1.37(a); Exhibit A w/copies of Transmittal form for Petition dated 8/30/02, Fee Transmittal dated 8/30/02, Request for Reconsideration of Petition Under 37 CFR 1.181 & 1.137(A), Return Receipt Postcard (5pp); Exhibit B - Declaration Under 37 CFR 1.68 of Michelle Simone (2pp); Exhibit C - TTC's Patent and Trademark Chronological Docket (17pp); Exhibit D - Declaration for Utility or Design Patent Application (37 CFR 1.63) (6pp); and Return Postcard |
| Remarks   |  | The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.  |
| <b>RENEWED PETITION UNDER 37 CFR 1.181 AND 1.37 (a)</b>   |  |   |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |
|--|---|
| Firm and Individual name                   | Townsend and Townsend and Crew LLP<br>Kevin Bastian Reg. No. 34,774 |
| Signature                                  | <i>[Signature]</i>  |
| Date                                       | February 5, 2003  |

| CERTIFICATE OF MAILING  |                         |
|---|-------------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents and Trademarks, Box PCT, Office of PCT Legal Administration, Washington, D.C. 20231 on this date: February 5, 2003 |                         |
| Typed or printed name   | Stephanie J. Whitehurst |
| Signature   | <i>[Signature]</i>      |
| Date  | February 5, 2003        |

# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 110

## Complete if Known

|                      |                  |
|----------------------|------------------|
| Application Number   | 09/554,960       |
| Filing Date          | April 12, 1998   |
| First Named Inventor | Kaslow, David C. |
| Examiner Name        |                  |
| Group Art Unit       |                  |
| Attorney Docket No.  | 015280-342100US  |

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ MoneyOrder ☐ Other ☐ None  
☒ Deposit Account:Deposit  
Account  
Number

20-1430

Deposit  
Account  
Name

Townsend and Townsend and Crew LLP

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments  
☒ Charge any additional fee(s) during the pendency of this application  
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

| Large Entity |          | Small Entity |          | Fee Description        | Fee Paid |
|--------------|----------|--------------|----------|------------------------|----------|
| Fee Code     | Fee (\$) | Fee Code     | Fee (\$) |                        |          |
| 101          | 740      | 201          | 370      | Utility filing fee     |          |
| 106          | 330      | 206          | 165      | Design filing fee      |          |
| 107          | 510      | 207          | 255      | Plant filing fee       |          |
| 108          | 740      | 208          | 370      | Reissue filing fee     |          |
| 114          | 160      | 214          | 80       | Provisional filing fee |          |

SUBTOTAL (1)

(\$)

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Total Claims       |         | Extra Claims |  | Fees from below |  | Fee Paid |
|--------------------|---------|--------------|--|-----------------|--|----------|
|                    | -20** = |              |  |                 |  |          |
| Independent Claims | -3** =  |              |  |                 |  |          |
| Multiple Dependent |         |              |  |                 |  |          |

| Large Entity |          | Small Entity |          | Fee Description  |
|--------------|----------|--------------|----------|--|
| Fee Code     | Fee (\$) | Fee Code     | Fee (\$) |  |
| 103          | 18       | 203          | 9        | Claims in excess of 20                                     |
| 102          | 84       | 202          | 42       | Independent claims in excess of 3                          |
| 104          | 280      | 204          | 140      | Multiple dependent claim, if not paid                      |
| 109          | 84       | 209          | 42       | ** Reissue independent claims over original patent         |
| 110          | 18       | 210          | 9        | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2)

(\$)

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

| Large Entity |          | Small Entity |          | Fee Description  | Fee Paid |
|--------------|----------|--------------|----------|--|----------|
| Fee Code     | Fee (\$) | Fee Code     | Fee (\$) |  |          |
| 105          | 130      | 205          | 65       | Surcharge - late filing fee or oath  |          |
| 127          | 50       | 227          | 25       | Surcharge - late provisional filing fee or cover sheet.                    |          |
| 139          | 130      | 139          | 130      | Non-English specification  |          |
| 147          | 2,520    | 147          | 2,520    | For filing a request for reexamination                                     |          |
| 112          | 920*     | 112          | 920*     | Requesting publication of SIR prior to Examiner action                     |          |
| 113          | 1,840*   | 113          | 1,840*   | Requesting publication of SIR after Examiner action                        |          |
| 115          | 110      | 215          | 55       | Extension for reply within first month                                     | 110      |
| 116          | 400      | 216          | 200      | Extension for reply within second month                                    |          |
| 117          | 920      | 217          | 460      | Extension for reply within third month                                     |          |
| 118          | 1,440    | 218          | 720      | Extension for reply within fourth month                                    |          |
| 128          | 1,960    | 228          | 980      | Extension for reply within fifth month                                     |          |
| 119          | 320      | 219          | 160      | Notice of Appeal   |          |
| 120          | 320      | 220          | 160      | Filing a brief in support of an appeal                                     |          |
| 121          | 280      | 221          | 140      | Request for oral hearing   |          |
| 138          | 1,510    | 138          | 1,510    | Petition to institute a public use proceeding                              |          |
| 140          | 110      | 240          | 55       | Petition to revive - unavoidable   |          |
| 141          | 1,280    | 241          | 640      | Petition to revive - unintentional   |          |
| 142          | 1,280    | 242          | 640      | Utility issue fee (or reissue)   |          |
| 143          | 460      | 243          | 230      | Design issue fee   |          |
| 144          | 620      | 244          | 310      | Plant issue fee  |          |
| 122          | 130      | 122          | 130      | Petitions to the Commissioner  |          |
| 123          | 50       | 123          | 50       | Petitions related to provisional applications                              |          |
| 126          | 180      | 126          | 180      | Submission of Information Disclosure Stmt                                  |          |
| 581          | 40       | 581          | 40       | Recording each patent assignment per property (times number of properties) |          |
| 146          | 740      | 246          | 370      | Filing a submission after final rejection (37 CFR § 1.129(a))              |          |
| 149          | 740      | 249          | 370      | For each additional invention to be examined (37 CFR § 1.129(b))           |          |
| 179          | 740      | 279          | 370      | Request for Continued Examination (RCE)                                    |          |
| 169          | 900      | 169          | 900      | Request for expedited examination of a design application                  |          |

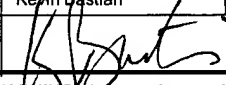
Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid SUBTOTAL (3)

110

## SUBMITTED BY

## Complete (if applicable)

|                   |   |                                   |        |           |                  |
|-------------------|---|-----------------------------------|--------|-----------|------------------|
| Name (Print/Type) | Kevin Bastian   | Registration No. (Attorney/Agent) | 34,774 | Telephone | 415-576-0200     |
| Signature         |  |                                   |        | Date      | February 5, 2003 |

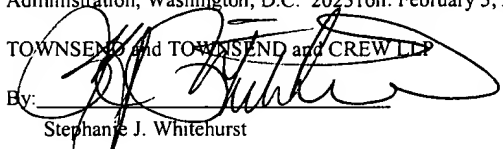
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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PATENT  
Atty. Docket No. 015280-342100US

TOWNSEND and TOWNSEND and CREW LLP

By:   
Stephanie J. Whitehurst

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

KASLOW, David C.;  
TSUBOI, Takafumi;  
TORII, Motomi

Application No.: 09/554,960

Filed: May 22, 2000

For: VACCINES FOR BLOCKING  
TRANSMISSION OF PLASMODIUM VIVAX

Examiner: Unassigned

Art Unit: Unassigned

REQUEST FOR RECONSIDERATION OF  
PETITION UNDER 37 CFR 1.181 AND  
1.137(A)

Commissioner for Patents and Trademarks  
Box PCT  
Office of PCT Legal Administration  
Washington, D.C. 20231

Sir:

Responsive to the Decision on Petition mailed November 5, 2002, Applicants submit a Request for Reconsideration of Petition Under 37 CFR 1.181 and 1.137(a).

Responsive to paragraph one of the Decision's Discussion regarding the Certificate of Mailing on the Transmittal Form erroneously indicating a date of July 23, 2002, Applicant's bring to the attention of the Commissioner that this was a clear typographical error on the part of the Applicant. The correct date is obviously August 30, 2002, as is clear from the following documents: 1) Transmittal Form PTO/SB/21, signed by Kevin Bastian, Attorney, and Jill Clarke, Secretary; 2) Fee Transmittal Form

Kaslow  
Application No. 09/554,960

PTO/SB/17, signed by Kevin Bastian; 3) Request for Reconsideration of Petition Under 37 CFR 1.181 And 1.137(A), Certificate of Mailing signed by Jill Clarke, Secretary; and 4) Return postcard with a mailing date of 8/30/02. (Exhibit A) Since the Request for Reconsideration contains a certificate of mailing identifying the mailing date as August 30, 2002, the requirements of 37 CFR 1.8 have been met.

Responsive to Item (3) of the Decision's Discussion regarding Nonreceipt of the Notification of Missing Requirements and Item (3) of the Decision's Discussion regarding Petition to Revive Unavoidably Abandoned International Application for Patent, enclosed are a newly executed Declaration Under 37 C.F.R. §1.68 of Michele Simone, a docket clerk in our U.S. docket department, and a copy of all of the pages of Townsend and Townsend and Crew LLP's "Patent and Trademark Chronological Docket" for **July 23, 2000**, the correct time period set for response to the Notification of Missing Requirements (Exhibit B and C, respectively).

In the Decision mailed November 5, 2002, the Office did not accept the newly executed Declaration of Michele Simone under 37 C.F.R. §1.68 filed on August 30, 2002, because the accompanying docket report failed to show all replies docketed for July 23, 2002.

Responsive to Item (1) of the Decision's Discussion regarding the Petition to Revive Unavoidably Abandoned International Application for Patent, enclosed is the Declaration under 37 CFR 1.63, executed by all three of the inventors named in the above-noted patent application including page three (3) of Dr. Kaslow's Declaration, which was inadvertently omitted during the original submission (Exhibit D).

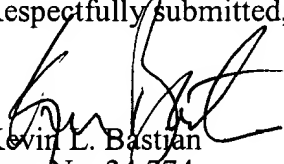
Applicants respectfully submit this request for reconsideration and believe this submission to be fully responsive to the Decision mailed November 5, 2002.

Applicants request that the Commissioner charge Deposit Account No. 20-1430 for all fees due in connection with the filing.

Kaslow  
Application No. 09/554,960

If a telephone conference would expedite prosecution of this application, the Examiner is invited to telephone the undersigned at 415-576-0200.

Respectfully submitted,



Kevin L. Bastian  
Reg. No. 34,774

TOWNSEND and TOWNSEND and CREW LLP  
Two Embarcadero Center, 8<sup>th</sup> Floor  
San Francisco, California 94111-3834  
Tel: (415) 576-0200  
Fax: (415) 576-0300  
KLB/cam/sjw  
Client No. 20350

SF 1420212 v1

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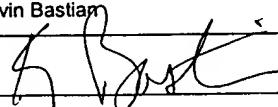
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| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence after initial filing)</i> | <b>Application Number</b>   | 09/554,960                    |                 |
|  | <b>Filing Date</b>          | May 22, 2000                  |                 |
|  | <b>First Named Inventor</b> | Kaslow, David                 |                 |
|  | <b>Group Art Unit</b>       |                               |                 |
|  | <b>Examiner Name</b>        |                               |                 |
| <b>Total Number of Pages in This Submission</b>  | 14                          | <b>Attorney Docket Number</b> | 015280-342100US |

| ENCLOSURES (check all that apply)  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><br><input type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment / Response<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input checked="" type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><br><br><br><br><br><br><br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><br><input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition<br><br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><br><br><br><br><br><br><br><br><input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><br>Request for Reconsideration of Petition Under 37 CFR 1.181 and 1.137(a) Mailed October 8, 2001 (2 pgs.); One executed Declaration under 37 CFR § 1.63 for David C. Kaslow (2 pages) and One executed Declaration under 37 CFR § 1.63 for Takafumi Tsuboi and Motomi Torii (3 pages); One Declaration Under 37 CFR § 1.68 of Michele Simone (2 pages); Patent and Trademark Chronological Docket for July 23, 2000 (1 page), and Return Postcard |
| <b>Remarks</b>   |  | <b>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</b>  |
| <b>RENEWED PETITION UNDER 37 CFR 1.181 AND 1.37 (a)</b>  |  |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |  |
|--|---|--|
| <b>Firm and Individual name</b>            | Townsend and Townsend and Crew LLP<br>Kevin Bastian   |  |
| <b>Signature</b>                           |  Reg. No. 34,774 |  |
| <b>Date</b>                                | August 30, 2002   |  |

| CERTIFICATE OF MAILING   |   |                             |
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| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents and Trademarks, Box PCT, Office of PCT Legal Administration, Washington, D.C. 20231 on this date: July 23, 2002 |   |                             |
| <b>Typed or printed name</b>   | Jill R. Clarke  |                             |
| <b>Signature</b>   |  | <b>Date</b> August 30, 2002 |

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PTO/SB/17 (11-01)

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|--|---|--------------------|------------|-------------|----------------|----------------------|------------------|---------------|--|----------------|--|---------------------|-----------------|
| <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2002</h3> <p style="margin: 0; font-size: small;">Patent fees are subject to annual revision.</p> <p style="margin: 0;"><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> | <p style="text-align: center; font-weight: bold; font-size: small;">Complete If Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>09/554,960</td> </tr> <tr> <td>Filing Date</td> <td>April 12, 1998</td> </tr> <tr> <td>First Named Inventor</td> <td>Kaslow, David C.</td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> <tr> <td>Group Art Unit</td> <td></td> </tr> <tr> <td>Attorney Docket No.</td> <td>015280-342100US</td> </tr> </table> | Application Number | 09/554,960 | Filing Date | April 12, 1998 | First Named Inventor | Kaslow, David C. | Examiner Name |  | Group Art Unit |  | Attorney Docket No. | 015280-342100US |
| Application Number   | 09/554,960  |                    |            |             |                |                      |                  |               |  |                |  |                     |                 |
| Filing Date  | April 12, 1998  |                    |            |             |                |                      |                  |               |  |                |  |                     |                 |
| First Named Inventor   | Kaslow, David C.  |                    |            |             |                |                      |                  |               |  |                |  |                     |                 |
| Examiner Name  |   |                    |            |             |                |                      |                  |               |  |                |  |                     |                 |
| Group Art Unit   |   |                    |            |             |                |                      |                  |               |  |                |  |                     |                 |
| Attorney Docket No.  | 015280-342100US   |                    |            |             |                |                      |                  |               |  |                |  |                     |                 |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 1440   |   |                    |            |             |                |                      |                  |               |  |                |  |                     |                 |

| <p><b>METHOD OF PAYMENT (check all that apply)</b></p> <p> <input type="checkbox"/> Check              <input type="checkbox"/> Credit Card              <input type="checkbox"/> MoneyOrder              <input type="checkbox"/> Other              <input type="checkbox"/> None         </p> <p><input checked="" type="checkbox"/> Deposit Account:</p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">           Deposit Account Number: 20-1430         </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">           Deposit Account Name: Townsend and Townsend and Crew LLP         </div> <p><b>The Commissioner is authorized to: (check all that apply)</b></p> <p> <input checked="" type="checkbox"/> Charge fee(s) indicated below              <input checked="" type="checkbox"/> Credit any overpayments         </p> <p> <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application         </p> <p> <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.         </p> <p style="text-align: center; font-weight: bold; font-size: small;">FEE CALCULATION</p> <p><b>1. BASIC FILING FEE</b></p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>101</td> <td>740</td> <td>201</td> <td>370</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>106</td> <td>330</td> <td>206</td> <td>165</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>107</td> <td>510</td> <td>207</td> <td>255</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>108</td> <td>740</td> <td>208</td> <td>370</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>114</td> <td>160</td> <td>214</td> <td>80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td></td> <td></td> </tr> </tbody> </table> <p><b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b></p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2"></th> <th colspan="2">Extra Claims</th> <th colspan="2">Fees from below</th> <th colspan="2">Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td><input type="text" value="20"/></td> <td>-20** =</td> <td><input type="text"/></td> <td>X</td> <td><input type="text"/></td> <td>=</td> <td><input type="text"/></td> </tr> <tr> <td>Independent Claims</td> <td><input type="text" value="3"/></td> <td>-3** =</td> <td><input type="text"/></td> <td>X</td> <td><input type="text"/></td> <td>=</td> <td><input type="text"/></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td>X</td> <td><input type="text"/></td> <td>=</td> <td><input type="text"/></td> </tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>103</td> <td>18</td> <td>203</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>102</td> <td>84</td> <td>202</td> <td>42</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>104</td> <td>280</td> <td>204</td> <td>140</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>109</td> <td>84</td> <td>209</td> <td>42</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>110</td> <td>18</td> <td>210</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td></td> <td></td> </tr> </tbody> </table> <p style="font-size: x-small;">**or number previously paid, if greater; For Reissues, see above</p> | Large Entity                    |              | Small Entity         |  | Fee Description      | Fee Paid | Fee Code             | Fee (\$) | Fee Code | Fee (\$) | 101 | 740 | 201 | 370 | Utility filing fee |  | 106 | 330 | 206 | 165 | Design filing fee |  | 107 | 510 | 207 | 255 | Plant filing fee |  | 108 | 740 | 208 | 370 | Reissue filing fee |  | 114 | 160 | 214 | 80 | Provisional filing fee |  | <b>SUBTOTAL (1)</b> |  |  |  |  |  |  |  | Extra Claims |  | Fees from below |  | Fee Paid |  | Total Claims | <input type="text" value="20"/> | -20** = | <input type="text"/> | X | <input type="text"/> | = | <input type="text"/> | Independent Claims | <input type="text" value="3"/> | -3** = | <input type="text"/> | X | <input type="text"/> | = | <input type="text"/> | Multiple Dependent |  |  |  | X | <input type="text"/> | = | <input type="text"/> | Large Entity |  | Small Entity |  | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 103 | 18 | 203 | 9 | Claims in excess of 20 |  | 102 | 84 | 202 | 42 | Independent claims in excess of 3 |  | 104 | 280 | 204 | 140 | Multiple dependent claim, if not paid |  | 109 | 84 | 209 | 42 | ** Reissue independent claims over original patent |  | 110 | 18 | 210 | 9 | ** Reissue claims in excess of 20 and over original patent |  | <b>SUBTOTAL (2)</b> |  |  |  |  |  | <p style="text-align: center; font-weight: bold; font-size: small;">FEE CALCULATION (continued)</p> <p><b>3. ADDITIONAL FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>105</td> <td>130</td> <td>205</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>127</td> <td>50</td> <td>227</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet.</td> <td></td> </tr> <tr> <td>139</td> <td>130</td> <td>139</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>147</td> <td>2,520</td> <td>147</td> <td>2,520</td> <td>For filing a request for reexamination</td> <td></td> </tr> <tr> <td>112</td> <td>920*</td> <td>112</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>113</td> <td>1,840*</td> <td>113</td> <td>1,840*</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>115</td> <td>110</td> <td>215</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>116</td> <td>400</td> <td>216</td> <td>200</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>117</td> <td>920</td> <td>217</td> <td>460</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>118</td> <td>1,440</td> <td>218</td> <td>720</td> <td>Extension for reply within fourth month</td> <td>1440</td> </tr> <tr> <td>128</td> <td>1,960</td> <td>228</td> <td>980</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>119</td> <td>320</td> <td>219</td> <td>160</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>120</td> <td>320</td> <td>220</td> <td>160</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>121</td> <td>280</td> <td>221</td> <td>140</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>138</td> <td>1,510</td> <td>138</td> <td>1,510</td> <td>Petition to Institute a public use proceeding</td> <td></td> </tr> <tr> <td>140</td> <td>110</td> <td>240</td> <td>55</td> <td>Petition to revive - unavoidable</td> <td></td> </tr> <tr> <td>141</td> <td>1,280</td> <td>241</td> <td>640</td> <td>Petition to revive - unintentional</td> <td></td> </tr> <tr> <td>142</td> <td>1,280</td> <td>242</td> <td>640</td> <td>Utility issue fee (or reissue)</td> <td></td> </tr> <tr> <td>143</td> <td>460</td> <td>243</td> <td>230</td> <td>Design issue fee</td> <td></td> </tr> <tr> <td>144</td> <td>620</td> <td>244</td> <td>310</td> <td>Plant issue fee</td> <td></td> </tr> <tr> <td>122</td> <td>130</td> <td>122</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>123</td> <td>50</td> <td>123</td> <td>50</td> <td>Petitions related to provisional applications</td> <td></td> </tr> <tr> <td>126</td> <td>180</td> <td>126</td> <td>180</td> <td>Submission of Information Disclosure Stmt</td> <td></td> </tr> <tr> <td>581</td> <td>40</td> <td>581</td> <td>40</td> <td>Recording each patent assignment per property (times number of properties)</td> <td></td> </tr> <tr> <td>146</td> <td>740</td> <td>246</td> <td>370</td> <td>Filing a submission after final rejection (37 CFR § 1.129(a))</td> <td></td> </tr> <tr> <td>149</td> <td>740</td> <td>249</td> <td>370</td> <td>For each additional invention to be examined (37 CFR § 1.129(b))</td> <td></td> </tr> <tr> <td>179</td> <td>740</td> <td>279</td> <td>370</td> <td>Request for Continued Examination (RCE)</td> <td></td> </tr> <tr> <td>169</td> <td>900</td> <td>169</td> <td>900</td> <td>Request for expedited examination of a design application</td> <td></td> </tr> <tr> <td colspan="5">Other fee (specify) _____</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;"><b>*Reduced by Basic Filing Fee Paid SUBTOTAL (3)</b></td> <td style="text-align: right;">(\$)<b>1440</b></td> </tr> </tbody> </table> | Large Entity |  | Small Entity |  | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath |  | 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet. |  | 139 | 130 | 139 | 130 | Non-English specification |  | 147 | 2,520 | 147 | 2,520 | For filing a request for reexamination |  | 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action |  | 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action |  | 115 | 110 | 215 | 55 | Extension for reply within first month |  | 116 | 400 | 216 | 200 | Extension for reply within second month |  | 117 | 920 | 217 | 460 | Extension for reply within third month |  | 118 | 1,440 | 218 | 720 | Extension for reply within fourth month | 1440 | 128 | 1,960 | 228 | 980 | Extension for reply within fifth month |  | 119 | 320 | 219 | 160 | Notice of Appeal |  | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal |  | 121 | 280 | 221 | 140 | Request for oral hearing |  | 138 | 1,510 | 138 | 1,510 | Petition to Institute a public use proceeding |  | 140 | 110 | 240 | 55 | Petition to revive - unavoidable |  | 141 | 1,280 | 241 | 640 | Petition to revive - unintentional |  | 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) |  | 143 | 460 | 243 | 230 | Design issue fee |  | 144 | 620 | 244 | 310 | Plant issue fee |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | 123 | 50 | Petitions related to provisional applications |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) |  | 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) |  | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  | Other fee (specify) _____ |  |  |  |  |  | <b>*Reduced by Basic Filing Fee Paid SUBTOTAL (3)</b> |  |  |  |  | (\$) <b>1440</b> |
|--|---------------------------------|--------------|----------------------|--|----------------------|----------|----------------------|----------|----------|----------|-----|-----|-----|-----|--------------------|--|-----|-----|-----|-----|-------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|--------------------|--|-----|-----|-----|----|------------------------|--|---------------------|--|--|--|--|--|--|--|--------------|--|-----------------|--|----------|--|--------------|---------------------------------|---------|----------------------|---|----------------------|---|----------------------|--------------------|--------------------------------|--------|----------------------|---|----------------------|---|----------------------|--------------------|--|--|--|---|----------------------|---|----------------------|--------------|--|--------------|--|-----------------|----------|----------|----------|----------|----------|-----|----|-----|---|------------------------|--|-----|----|-----|----|-----------------------------------|--|-----|-----|-----|-----|---------------------------------------|--|-----|----|-----|----|--|--|-----|----|-----|---|--|--|---------------------|--|--|--|--|--|---|--------------|--|--------------|--|-----------------|----------|----------|----------|----------|----------|-----|-----|-----|----|-------------------------------------|--|-----|----|-----|----|---|--|-----|-----|-----|-----|---------------------------|--|-----|-------|-----|-------|--|--|-----|------|-----|------|--|--|-----|--------|-----|--------|---|--|-----|-----|-----|----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-------|-----|-----|---|------|-----|-------|-----|-----|--|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|--------------------------|--|-----|-------|-----|-------|---|--|-----|-----|-----|----|----------------------------------|--|-----|-------|-----|-----|------------------------------------|--|-----|-------|-----|-----|--------------------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|-----------------|--|-----|-----|-----|-----|-------------------------------|--|-----|----|-----|----|---|--|-----|-----|-----|-----|---|--|-----|----|-----|----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|---|--|---------------------------|--|--|--|--|--|---|--|--|--|--|------------------|
| Large Entity   |                                 | Small Entity |                      | Fee Description  |                      |          | Fee Paid             |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| Fee Code   | Fee (\$)                        | Fee Code     | Fee (\$)             |  |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 101  | 740                             | 201          | 370                  | Utility filing fee   |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 106  | 330                             | 206          | 165                  | Design filing fee  |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 107  | 510                             | 207          | 255                  | Plant filing fee   |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 108  | 740                             | 208          | 370                  | Reissue filing fee   |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 114  | 160                             | 214          | 80                   | Provisional filing fee   |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| <b>SUBTOTAL (1)</b>  |                                 |              |                      |  |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
|  |                                 | Extra Claims |                      | Fees from below  |                      | Fee Paid |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| Total Claims   | <input type="text" value="20"/> | -20** =      | <input type="text"/> | X  | <input type="text"/> | =        | <input type="text"/> |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| Independent Claims   | <input type="text" value="3"/>  | -3** =       | <input type="text"/> | X  | <input type="text"/> | =        | <input type="text"/> |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| Multiple Dependent   |                                 |              |                      | X  | <input type="text"/> | =        | <input type="text"/> |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| Large Entity   |                                 | Small Entity |                      | Fee Description  | Fee Paid             |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| Fee Code   | Fee (\$)                        | Fee Code     | Fee (\$)             |  |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 103  | 18                              | 203          | 9                    | Claims in excess of 20   |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 102  | 84                              | 202          | 42                   | Independent claims in excess of 3  |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 104  | 280                             | 204          | 140                  | Multiple dependent claim, if not paid                                      |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 109  | 84                              | 209          | 42                   | ** Reissue independent claims over original patent                         |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 110  | 18                              | 210          | 9                    | ** Reissue claims in excess of 20 and over original patent                 |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| <b>SUBTOTAL (2)</b>  |                                 |              |                      |  |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| Large Entity   |                                 | Small Entity |                      | Fee Description  | Fee Paid             |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| Fee Code   | Fee (\$)                        | Fee Code     | Fee (\$)             |  |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 105  | 130                             | 205          | 65                   | Surcharge - late filing fee or oath  |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 127  | 50                              | 227          | 25                   | Surcharge - late provisional filing fee or cover sheet.                    |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 139  | 130                             | 139          | 130                  | Non-English specification  |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 147  | 2,520                           | 147          | 2,520                | For filing a request for reexamination                                     |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 112  | 920*                            | 112          | 920*                 | Requesting publication of SIR prior to Examiner action                     |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 113  | 1,840*                          | 113          | 1,840*               | Requesting publication of SIR after Examiner action                        |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 115  | 110                             | 215          | 55                   | Extension for reply within first month                                     |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 116  | 400                             | 216          | 200                  | Extension for reply within second month                                    |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 117  | 920                             | 217          | 460                  | Extension for reply within third month                                     |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 118  | 1,440                           | 218          | 720                  | Extension for reply within fourth month                                    | 1440                 |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 128  | 1,960                           | 228          | 980                  | Extension for reply within fifth month                                     |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 119  | 320                             | 219          | 160                  | Notice of Appeal   |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 120  | 320                             | 220          | 160                  | Filing a brief in support of an appeal                                     |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 121  | 280                             | 221          | 140                  | Request for oral hearing   |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 138  | 1,510                           | 138          | 1,510                | Petition to Institute a public use proceeding                              |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 140  | 110                             | 240          | 55                   | Petition to revive - unavoidable   |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 141  | 1,280                           | 241          | 640                  | Petition to revive - unintentional   |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 142  | 1,280                           | 242          | 640                  | Utility issue fee (or reissue)   |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 143  | 460                             | 243          | 230                  | Design issue fee   |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 144  | 620                             | 244          | 310                  | Plant issue fee  |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 122  | 130                             | 122          | 130                  | Petitions to the Commissioner  |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 123  | 50                              | 123          | 50                   | Petitions related to provisional applications                              |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 126  | 180                             | 126          | 180                  | Submission of Information Disclosure Stmt                                  |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 581  | 40                              | 581          | 40                   | Recording each patent assignment per property (times number of properties) |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 146  | 740                             | 246          | 370                  | Filing a submission after final rejection (37 CFR § 1.129(a))              |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 149  | 740                             | 249          | 370                  | For each additional invention to be examined (37 CFR § 1.129(b))           |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 179  | 740                             | 279          | 370                  | Request for Continued Examination (RCE)                                    |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| 169  | 900                             | 169          | 900                  | Request for expedited examination of a design application                  |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| Other fee (specify) _____  |                                 |              |                      |  |                      |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |
| <b>*Reduced by Basic Filing Fee Paid SUBTOTAL (3)</b>  |                                 |              |                      |  | (\$) <b>1440</b>     |          |                      |          |          |          |     |     |     |     |                    |  |     |     |     |     |                   |  |     |     |     |     |                  |  |     |     |     |     |                    |  |     |     |     |    |                        |  |                     |  |  |  |  |  |  |  |              |  |                 |  |          |  |              |                                 |         |                      |   |                      |   |                      |                    |                                |        |                      |   |                      |   |                      |                    |  |  |  |   |                      |   |                      |              |  |              |  |                 |          |          |          |          |          |     |    |     |   |                        |  |     |    |     |    |                                   |  |     |     |     |     |                                       |  |     |    |     |    |  |  |     |    |     |   |  |  |                     |  |  |  |  |  |   |              |  |              |  |                 |          |          |          |          |          |     |     |     |    |                                     |  |     |    |     |    |   |  |     |     |     |     |                           |  |     |       |     |       |  |  |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |      |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |  |   |  |  |  |  |                  |

|                   |               |                                   |        |                          |                 |
|-------------------|---------------|-----------------------------------|--------|--------------------------|-----------------|
| SUBMITTED BY      |               |                                   |        | Complete (if applicable) |                 |
| Name (Print/Type) | Kevin Bastian | Registration No. (Attorney/Agent) | 34,774 | Telephone                | 415-576-0200    |
| Signature         |               |                                   |        | Date                     | August 30, 2002 |

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PATENT  
Atty. Docket No. 015280-342100US

TOWNSEND and TOWNSEND and CREW LLP

By: Jill R. Clarke  
Jill R. Clarke

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

KASLOW, David C.;  
TSUBOI, Takafumi;  
TORII, Motomi

Application No.: 09/554,960

Filed: May 22, 2000

For: VACCINES FOR BLOCKING  
TRANSMISSION OF PLASMODIUM VIVAX

Examiner: N/A

Art Unit: N/A

REQUEST FOR RECONSIDERATION OF  
PETITION UNDER 37 CFR 1.181 AND  
1.137(A)

Office of PCT Legal Administration  
Commissioner for Patents and Trademarks  
Box PCT  
Washington, D.C. 20231

Sir:

Responsive to the Decision on Petition mailed February 1, 2002, Applicants submit a Request for Reconsideration of Petition Under 37 CFR 1.181 and 1.137(a).

Responsive to Item (3) of the Decision's Discussion regarding Nonreceipt of the Notification of Missing Requirements and Item (3) of the Decision's Discussion regarding Petition to Revive Unavoidably Abandoned International Application for Patent, enclosed are a newly executed Declaration Under 37 C.F.R. §1.68 of Michele Simone, a docket clerk in our U.S. docket department, and a copy of the relevant page of Townsend and Townsend and Crew LLP's "Patent and Trademark Chronological Docket" for July 23, 2000, the correct time period set for response to the Notification of Missing Requirements.

In the Decision mailed February 1, 2002, the Office did not accept the Declaration of Michele Simone under 37 C.F.R. §1.68 filed on October 8, 2001, because the accompanying docket report incorrectly identified August 23, 2000 as the time period for reply to the Notification. The attached Declaration of Michele Simone



Kaslow  
Application No. 09/554,960

addresses this. A docket entry corresponding to the Notification of Missing Requirements would have appeared on page 409 (where indicated by an arrow) had there been a pending due date known to us, since the docket report is sorted by due date and then by client file number. There is no entry for this matter on our docket for July 23, 2000.


Responsive to Item (1) of the Decision's Discussion regarding the Petition to Revive Unavoidably Abandoned International Application for Patent, enclosed are two Declarations under 37 CFR 1.63, executed by all three of the inventors named in the above-noted patent application.

Applicants respectfully submit this request for reconsideration and believe this submission to be fully responsive to the Decision mailed February 1, 2002.

Applicants request that the Commissioner charge Deposit Account No. 20-1430 for all fees due in connection with the filing.

If a telephone conference would expedite prosecution of this application, the Examiner is invited to telephone the undersigned at 415-576-0200.

Respectfully submitted,

  
Kevin L. Bastian  
Reg. No. 34,774

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Mailing Date: 8/30/02                      Atty.: KLB/jrc  
File No.: 015280-342100US              Application No. 09/554,960  
Inventor(s): KASLOW, David, *et al.*  
Title: Vaccines for Blocking Transmission of Plasmodium Vivax

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Transmittal Form PTO/SB/21 with extension of time (1 pg. + 1pg. copy),  
Fee Transmittal PTO/SB/17 (1 pg. + 1 pg. copy) with authorization to  
charge Deposit Account No. 20-1430 in the amount of \$1440, for  
extension of time; Request for Reconsideration of Petition Under 37 CFR  
1.181 and 1.47(a) (2 pgs.); One Declaration Under 37 CFR § 1.68 of  
Michele Simone (2 pages), Patent and Trademark Chronological Docket  
for July 23, 2000 (1 page), One executed Declaration under 37 CFR §  
1.63 for David C. Kaslow (2 pages) and One executed Declaration under  
37 CFR § 1.63 for Takafumi Tsuboi and Motomi Torii (3 pages);  
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Mailing Date: 8/30/02                      Atty.: KLB/jrc  
File No.: 015280-342100US              Application No. 09/554,960  
Inventor(s): KASLOW, David, *et al.*  
Title: Vaccines for Blocking Transmission of Plasmodium Vivax

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Transmittal Form PTO/SB/21 with extension of time (1 pg. + 1pg. copy),  
Fee Transmittal PTO/SB/17 (1 pg. + 1 pg. copy) with authorization to  
charge Deposit Account No. 20-1430 in the amount of \$1440, for  
extension of time; Request for Reconsideration of Petition Under 37 CFR  
1.181 and 1.47(a) (2 pgs.); One Declaration Under 37 CFR § 1.68 of  
Michele Simone (2 pages), Patent and Trademark Chronological Docket  
for July 23, 2000 (1 page), One executed Declaration under 37 CFR §  
1.63 for David C. Kaslow (2 pages) and One executed Declaration under  
37 CFR § 1.63 for Takafumi Tsuboi and Motomi Torii (3 pages);  
Certificate of First Class Mailing.

*Please stamp the date of receipt of the enclosed documents and return this card to  
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DTOSR-001-001PTD 09 SEP 2002

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

KASLOW, David C.;  
TSUBOI, Takafumi;  
TORII, Motomi

US Application No.: 09/554,960  
International Application No. PCT/US98/25742

Filed: May 22, 2000

For: VACCINES FOR BLOCKING  
TRANSMISSION OF PLASMODIUM VIVAX

Examiner: Unassigned

Art Unit: Unassigned

DECLARATION  
UNDER 37 C.F.R. §1.68  
OF MICHELE SIMONE

Office of PCT Legal Administration  
Commissioner for Patents and Trademarks  
Box PCT  
Washington, D.C. 20231

Sir:

I, MICHELE SIMONE, declare as follows:

1. I am a docketing clerk with the U.S. Docket Department at Townsend and Townsend and Crew LLP (TTC), San Francisco, California. I have been a docketing clerk at TTC since 1990.

2. I am responsible for handling incoming mail, including Office Actions, from the United States Patent and Trademark Office (USPTO). Under standard TTC operating procedures, Office Actions received from the USPTO are entered in TTC's "Patent and Trademark Docket Chronological" by their due date(s). Accordingly, if a Notification of Missing Requirements Under 35 U.S.C. 371 was mailed from the USPTO on June 23, 2000, and had been received by TTC, it would have been entered with a due date of July 23, 2000.

3. I have reviewed the docket entries for items due July 23, 2000, and found none corresponding to the subject application.

4. Attached is an excerpt of the relevant part of the Docket identifying all entries having a due date of July 23, 2000.

5. The docket entry for the subject missing Notification of Missing Requirements Under 35 U.S.C. 371 would have been listed on page 409, given that matters for a given date are ordered by client number and matter number. This page shows client numbers to confirm that this matter would have been on this page. No such entry is listed.

6. I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statement were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Dated: February 5, 2003



Michele Simone

TOWNSEND and TOWNSEND and CREW LLP  
Two Embarcadero Center, 8<sup>th</sup> Floor  
San Francisco, California 94111-3834  
(415) 576-0200 / Fax: (415) 576-0300

**Client No. 20350**

Date: 06/30/00  
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|------------------|----------|------------------------------|---|---------|----------------------------------|-----|
| RCC<br>MZM       | 07/23/00 | FORGN FILE                   | Hyundai Electronics Inds. Ltd.<br>000939 066800US United States of America<br>(Novel Polymers & Photoresist Compositions Using the Same |         | PENDING<br>09/360402<br>07/23/99 | P   |
| DNS              | 07/23/00 | USP-TARGET                   | Bechtel Corporation<br>005268 077400US United States of America<br>(BYPASS GAS STREAM DESULFURING)                                      |         | UNFILED                          | P   |
| DNS<br>GBY<br>KK | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Neopost Inc.<br>006969 019900US United States of America<br>(Open Postage API)  |         | UNFILED                          | P   |
| PCH              | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Mallinckrodt Inc.<br>009103 017100US United States of America<br>(Method & Apparatus for Improving the Accuracy of Non )                |         | UNFILED                          | P   |
| PCH              | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Mallinckrodt Inc.<br>009103 017200US United States of America<br>(Non Invasive Method & Device for Monitoring Body Fluid & )            |         | UNFILED                          | P   |
| PCH<br>GSB       | 07/23/00 | FORGN FILE                   | Logitech Inc.<br>009623 015600US United States of America<br>(Digital Joystick Using Capacitive Sensor )                                |         | PENDING<br>09/360479<br>07/23/99 | P   |

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|------------|---|--|----------------------------------|----------------------------------|----------------------------|-----|
| PCH<br>GSB | 07/23/00 12 MO REMINDER<br>USP-IDS<br>(Final) | Logitech Inc.<br>009623 015600US<br>(Digital Joystick Using Capacitive Sensor )                      | United States of America         | PENDING<br>09/360479<br>07/23/99 | P                          |     |
| PCH<br>RL  | 07/23/00 1 MO FORGN                           | Logitech Inc.<br>009623 023800US<br>(Computer Mouse Design "Second Barracuda"                        | United States of America         | PENDING<br>29/119058<br>02/23/00 | P                          |     |
| PCH        | 07/23/00 USP-PARTS DUE2                       | Exar Corporation<br>010262 012900US<br>(UART With Compressed User Accessible Interrupt Codes         | United States of America         | PENDING<br>09/528089<br>03/17/00 | P                          |     |
| PCH        | 07/23/00 1 MO UNTIL DUE<br>USP-TARGET         | Exar Corporation<br>010262 013200US<br>(Self Powered, Maximum Conductive, Low Turn-On Voltage CMOS ) | United States of America         | UNFILED                          | P                          |     |
| PCH        | 07/23/00 1 MO UNTIL DUE<br>USP-TARGET         | Exar Corporation<br>010262 013300US<br>(Automatic Frequency Band Selector                            | United States of America         | UNFILED                          | P                          |     |
| KLB        | 07/23/00 1 MO UNTIL DUE<br>USP-TARGET         | DNA Plant Technology Corporation<br>012176 010700US<br>(New Plant Transformation Vectors)            | United States of America         | UNFILED                          | P                          |     |

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| ATTY              | DUE DATE | ACTION DUE/<br>ACTION TYPE               | CLIENT<br>FILE NO.<br>CLASS (ES)   | COUNTRY                  | STATUS/<br>NUMBER/<br>DATE       | P/M |
|-------------------|----------|--|--|--------------------------|----------------------------------|-----|
| DNS               | 07/23/00 | 6 MO UNTIL DUE<br>USP-NON PROV           | Kenneth C. Johnson<br>013860 001600US<br>(Wafer Alignment Sensor Using A Phase Shifted Microlens ) | United States of America | PENDING<br>60/177994<br>01/24/00 | P   |
| KLB               | 07/23/00 | ACT STAT CHK<br>USP-ISSUE FEE<br>(Final) | Corixa Corporation<br>014058 002111US<br>(PROKARYOTIC EXPRESSION OF MHC PROTEINS)                  | United States of America | PENDING<br>08/470535<br>06/06/95 | P   |
| KLB               | 07/23/00 | 2 MO EXT<br>USP-RESPONSE                 | Corixa Corporation<br>014058 008710US<br>(Compounds & Methods for Immunotherapy & Diagnosis of )   | United States of America | PENDING<br>09/073010<br>05/05/98 | P   |
| KLB<br>TLS        | 07/23/00 | USP-TARGET                               | Neose Technologies, Inc.<br>014137 000555US<br>(INTERCELLULAR ADHESION MEDIATORS)                  | United States of America | UNFILED                          | P   |
| KLB<br>JJJ<br>TLS | 07/23/00 | USP-TARGET                               | Neose Technologies, Inc.<br>014137 011800US<br>(MINIGENES)   | United States of America | UNFILED                          | P   |
| JMH               | 07/23/00 | ACT STAT CHK<br>USP-ISSUE FEE<br>(Final) | Heartport, Inc.<br>014635 002420US<br>(SYSTEM FOR CARDIAC PROCEDURES)                              | United States of America | PENDING<br>08/453426<br>05/30/95 | P   |

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|------------|----------|--|---|--------------------------|----------------------------------|-----|
| JMH        | 07/23/00 | ACT STAT CHK<br>USP-ISSUE FEE<br>(Final) | Heartport, Inc.<br>014635 003630US<br>(DEVICE FOR MINIMIZING HEART DISPLACEMENTS DURING BEATING )       | United States of America | PENDING<br>08/710231<br>09/13/96 | P   |
| WMS<br>ATS | 07/23/00 | 1 MO UNTIL DUE<br>USP-NON PROV           | GenPharm International, Inc.<br>014643 010500US<br>(Human CTLA-4 Antibodies & Their Uses                | United States of America | PENDING<br>60/150452<br>08/24/99 | P   |
| WMS<br>ATS | 07/23/00 | 1 MONTH TO FILE<br>US-FOREIGN FILE       | GenPharm International, Inc.<br>014643 010500US<br>(Human CTLA-4 Antibodies & Their Uses                | United States of America | PENDING<br>60/150452<br>08/24/99 | P   |
| KBD        | 07/23/00 | USP-PARTS DUE2                           | Axys Pharmaceuticals, Inc.<br>015058 003000US<br>(Novel Compounds & Compositions as Protease Inhibitors | United States of America | PENDING<br>09/526090<br>03/15/00 | P   |
| BSS<br>MDC | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET             | Altera Corporation<br>015114 050220US<br>(NEW METHOD OF PROGRAMMING CASCADED SRAM BASED PLD WITHOUT)    | United States of America | UNFILED                          | P   |
| BSS<br>MDC | 07/23/00 | USP-TARGET                               | Altera Corporation<br>015114 053010US<br>(Implement Vertical Lines Segmentation without need for )      | United States of America | UNFILED                          | P   |



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|-------------------|----------|----------------------------|---|--------------------------|----------------------------------|-----|
| GWC<br>KAW<br>MEH | 07/23/00 | FORGN FILE                 | National Institutes of Health<br>015280 286200US<br>(Double-Stranded RNA Dependent Protein Kinase Derived )   | United States of America | PENDING<br>09/230548<br>07/23/99 | P   |
| GWC<br>TLS        | 07/23/00 | 1 MO EXT<br>USP-RESPONSE   | National Institutes of Health<br>015280 295200US  | United States of America | PENDING<br>09/054281<br>04/02/98 | P   |
| KBD<br>J3M        | 07/23/00 | 2 MO EXT<br>USP-RESPONSE   | Panorama Research, Inc.<br>015325 001600US<br>(CHIMERIC ENDONUCLEASES FOR DETECTING INTERMOLECULAR )<br>(Methods & Compositions for the Treatment & Prevention of ) | United States of America | PENDING<br>09/054331<br>04/02/98 | P   |
| KRA               | 07/23/00 | FORGN FILE                 | Tatung Telecom<br>015781 000700US<br>(Switchmode Telephone Line Interface Regulating Telephone )  | United States of America | PENDING<br>09/359845<br>07/23/99 | P   |
| RTO<br>CPW        | 07/23/00 | 2 MO EXT<br>USP-PARTS DUE2 | Accuflow, Inc.<br>016262 000220US<br>(Multiphase Flow Measurement Method & Apparatus  | United States of America | PENDING<br>09/488190<br>01/20/00 | P   |
| WLS<br>BK         | 07/23/00 | USP-TARGET                 | Applied Materials Inc.<br>016301 036200US<br>(Gas Delivery & Exhaust in One Plate Via an Array of )   | United States of America | UNFILED                          | P   |

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|------------|----------|------------------------------|--|--------------------------|------------|----------------------------------|-----|
| WLS<br>BK  | 07/23/00 | USP-TARGET                   | Applied Materials Inc.<br>016301 036300US                    | United States of America |            | UNFILED                          | P   |
|            |          |                              | (Methyl Modified Surfactant Templated Mosporous Thin Films ) |                          |            |                                  |     |
| WLS<br>BK  | 07/23/00 | USP-TARGET                   | Applied Materials Inc.<br>016301 036400US                    | United States of America |            | UNFILED                          | P   |
|            |          |                              | (Moveable Vacuum Transfer Chamber in Stack Chambers )        |                          |            |                                  |     |
| JMH        | 07/23/00 | RESPONSE DUE<br>US-RESPONSE  | RadioTherapeutics Corporation<br>016807 000600US             | United States of America |            | PENDING<br>08/605765<br>02/22/96 | P   |
|            |          |                              | (Method & Device For Enhancing Vessel Occlusion)             |                          |            |                                  |     |
| RCC<br>LSC | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Hitachi, LTD<br>016869 007200US                              | United States of America |            | UNFILED                          | P   |
|            |          |                              | (Reexamination of Patent No. 5,434,825)                      |                          |            |                                  |     |
| BSS<br>GTG | 07/23/00 | USP-TARGET                   | Sigma Delta<br>016998 002010US                               | United States of America |            | UNFILED                          | P   |
|            |          |                              | (Low Cost Motor.with Speed Controller                        |                          |            |                                  |     |
| BSS<br>GTG | 07/23/00 | USP-TARGET                   | Sigma Delta<br>016998 002110US                               | United States of America |            | UNFILED                          | P   |
|            |          |                              | (Integrated Brake Control System)                            |                          |            |                                  |     |

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|------------|----------|------------------------------|--|--------------------------|----------------------------------|-----|
| PCH<br>CEK | 07/23/00 | 2 MO EXT<br>USP-FINAL        | Creative Labs Inc.<br>017002 003630US<br>(DIGITAL SIGNAL PROCESSOR FOR ADDING HARMONIC CONTENT TO) | United States of America | PENDING<br>09/007993<br>01/16/98 | P   |
| DNS<br>RL  | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Alpine Microsystems, Inc.<br>017603 000121US<br>(Integrated Circuits Packaging System and Method)  | United States of America | UNFILED                          | P   |
| WLS        | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Brightwood, Inc.<br>017685 000800US<br>(Appartus & Method for Computerized Sewing)                 | United States of America | UNFILED                          | P   |
| JMH        | 07/23/00 | FORGN FILE                   | Vasca, Inc.<br>017742 003600US<br>(Methods & Kits for Locking & Disinfecting Implanted )           | United States of America | PENDING<br>09/359842<br>07/23/99 | P   |
| PHA<br>GTG | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Yahoo, Inc.<br>017887 004500US<br>(Method for Achieving High Performance Client Server )           | United States of America | UNFILED                          | P   |
| PHA<br>GTG | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Yahoo, Inc.<br>017887 004600US<br>(System for Dynamic Generation of Online Streaming Media         | United States of America | UNFILED                          | P   |

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|------------|----------|------------------------------|---|--------------------------|----------------------------------|-----|
| PHA<br>GTG | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Yahoo, Inc.<br>017887 004700US<br>(System & Methods for Targeting Online Advertiser & Merchant )      | United States of America | UNFILED                          | P   |
| PHA<br>GTG | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Yahoo, Inc.<br>017887 004800US<br>(System & Method for Identifying Users' Browser Plugin & )          | United States of America | UNFILED                          | P   |
| JFH        | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Sim Sports, Inc.<br>017958 000700US<br>(SNOWBOARD BINDING)  | United States of America | UNFILED                          | P   |
| KBD<br>RTA | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Arevia GmbH<br>018002 002100US<br>(Use of Cathepsin s in the Diagnosis & Treatment of )               | United States of America | UNFILED                          | P   |
| JMH<br>MDB | 07/23/00 | 1 MO FORGN                   | VISX, Incorporated<br>018158 008210US<br>(Systems & Methods for Corneal Surface Ablation to Correct ) | United States of America | PENDING<br>09/379372<br>08/23/99 | P   |
| PHA<br>DDT | 07/23/00 | USP-TARGET                   | Netcentives, Inc.<br>018167 003300US<br>(Low Authentication Promotion Algorithm and Circuit Breaker   | United States of America | UNFILED                          | P   |

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|------------|----------|------------------------------|---|--------------------------|----------------------------------|-----|
| LSC<br>RTO | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | QUINTA CORPORATION<br>018233 000200US<br>(SIGNAL PROCESSING ADVANTAGE ASSOCIATED WITH MAGNETO-OPTICAL)  | United States of America | UNFILED                          | P   |
| RTO        | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Silicon Genesis Corporation<br>018419 015400US<br>(Controlled Cleavage Process Using Pressurized Fluid) | United States of America | UNFILED                          | P   |
| KLB        | 07/23/00 | USP-TARGET                   | Valentis, Inc.<br>018484 000900US<br>(METHODS FOR PREPARING NUCLEIC ACIDS FOR GENE THERAPY)             | United States of America | UNFILED                          | P   |
| KAW<br>WBK | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | ICAGEN, Inc.<br>018512 003700US<br>(Pyrazole Amides as Potassium Ion Channels Openers)                  | United States of America | UNFILED                          | P   |
| CJK        | 07/23/00 | USP-TARGET                   | iLeverage Corporation<br>018746 000700US<br>(APPARATUS & METHOD FOR DISTRIBUTED MESSAGING FRAMEWORK)    | United States of America | UNFILED                          | P   |
| EGW<br>WBK | 07/23/00 | 1 MO EXT<br>USP-RESPONSE     | Tularik Inc.<br>018781 001910US<br>(Pyrimidine Derivatives)   | United States of America | PENDING<br>09/249641<br>02/12/99 | P   |

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|------------|----------|--------------------------------|--|--------------------------|--|----------------------------------|-----|
| DNS<br>SYP | 07/23/00 | ACT STAT CHK<br>USP-PARTS DUE2 | Softfoundry, Inc.<br>018853 000110US             | United States of America |  | PENDING<br>09/286109<br>04/02/99 | P   |
| BSS        | 07/23/00 | ACT STAT CHK<br>USP-IDS        | Fairchild Semiconductor Corp.<br>018865 000710US | United States of America | (Automated Embroidery Stitching)                               | PENDING<br>09/285191<br>03/15/99 | P   |
| RTO<br>KJT | 07/23/00 | 1 MO EXT<br>USP-RESPONSE       | Ripley Corporation<br>018886 001510US            | United States of America | (High Performance Multi-Chip Flip Package)                     | PENDING<br>09/275735<br>03/24/99 | P   |
| RTO<br>KK  | 07/23/00 | USP-TARGET                     | Interlane Media<br>018932 001300US               | United States of America | (Method for Packaged Sponge or Porous Polymeric Products)      | UNFILED                          | P   |
| LSC<br>DJG | 07/23/00 | 2 MO EXT<br>USP-RESPONSE       | Maquire Boss (Ceetak Limited)<br>019204 000100US | United States of America | (Method for Selling Advertisements on a Computer Display)      | PENDING<br>09/264172<br>03/05/99 | P   |
| PHA<br>GTG | 07/23/00 | USP-TARGET                     | YottaYotta, Inc.<br>019417 000210US              | United States of America | (Cutting or Sealing Plastics Materials)                        | UNFILED                          | P   |
|            |          |                                |  |                          | (Storage Routing and Extendable Screening Server Systems and ) |                                  |     |

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| ATTY              | DUE DATE | ACTION DUE/<br>ACTION TYPE         | CLIENT<br>FILE NO.<br>CLASS (ES)   | COUNTRY                  | STATUS/<br>NUMBER/<br>DATE       | P/M |
|-------------------|----------|------------------------------------|--|--------------------------|----------------------------------|-----|
| JOL               | 07/23/00 | USP-PARTS DUE2                     | Sangamo Biosciences<br>019496 003020US<br>(Zinc Finger Protein Compositions)                         | United States of America | PENDING<br>09/535088<br>03/23/00 | P   |
| WMS<br>JSM        | 07/23/00 | 2 MO EXT<br>USP-RESPONSE           | Trigen Limited<br>019558 000600US<br>(THROMBIN INHIBITORS)   | United States of America | PENDING<br>09/202943<br>12/22/98 | P   |
| RTO<br>PAD<br>GBY | 07/23/00 | ACT STAT CHK<br>USP-PARTS DUE2     | MetaEdge, Corp.<br>019608 000130US<br>(System for Providing a Reverse Star Schema Data Model)        | United States of America | PENDING<br>09/306693<br>05/06/99 | P   |
| WMS<br>TLS        | 07/23/00 | 1 MONTH TO FILE<br>US-FOREIGN FILE | CellGate<br>019801 000200US<br>(Compositions & Methods for Enhancing Drug Delivery Across )          | United States of America | PENDING<br>60/150510<br>08/24/99 | P   |
| WMS<br>TLS        | 07/23/00 | 1 MO UNTIL DUE<br>USP-NON PROV     | CellGate<br>019801 000200US<br>(Compositions & Methods for Enhancing Drug Delivery Across )          | United States of America | PENDING<br>60/150510<br>08/24/99 | P   |
| RGP               | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET       | Impulse Devices, Inc.<br>019894 002400US<br>(System for Coupling a Driver Assembly to a Cavitation ) | United States of America | UNFILED                          | P   |

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Time: 13:36:57

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|------------|----------|------------------------------|---|--------------------------|----------------------------|-----|
| RGP        | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Impulse Devices, Inc.<br>019894 002500US<br>(High Energy Photon Source)                                 | United States of America | UNFILED                    | P   |
| RGP        | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Impulse Devices, Inc.<br>019894 002600US<br>(High Energy Photon Source Utilizing a Cavitation Nuclear ) | United States of America | UNFILED                    | P   |
| RGP        | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Impulse Devices, Inc.<br>019894 002700US<br>(Cavitation Nuclear Reactor Utilizing a Shaped Core )       | United States of America | UNFILED                    | P   |
| RGP        | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Impulse Devices, Inc.<br>019894 002800US<br>(Liquid Cavitation Nuclear Reactor Coupled to a High )      | United States of America | UNFILED                    | P   |
| DNS<br>JKO | 07/23/00 | USP-TARGET                   | SportBug.com, Inc.<br>019925 000300US<br>(Method for Providing Services to Athletics                    | United States of America | UNFILED                    | P   |
| WMS<br>RTA | 07/23/00 | USP-TARGET                   | ChemoCentryx, Inc.<br>019934 001110US<br>(CIP Methods and Compositions for Inducing an Immune )         | United States of America | UNFILED                    | P   |



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|------------|----------|------------------------------|---|--------------------------|----------------------------------|-----|
| RTO<br>JKO | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Tradking Smart, Inc.<br>020077 000500US   | United States of America | UNFILED                          | P   |
| SWP<br>MGS | 07/23/00 | 1 MO FORGN                   | (Method for Designing, Building, Testing, & Deploying )<br>Virginia Mason Research Center<br>020149 000100US  | United States of America | PENDING<br>09/379211<br>08/23/99 | P   |
| DHM<br>RJB | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | (Peptides & Peptides Analogues Desinged from a Diabetes )<br>Global IP Sound AB<br>020184 000200US            | United States of America | UNFILED                          | P   |
| DHM<br>RJB | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | (Encoding and Decoding of a Digital Signal)<br>Global IP Sound AB<br>020184 000300US                          | United States of America | UNFILED                          | P   |
| RTO<br>BXS | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | (Transmission Over Packet Switched Networks)<br>Bright Microelectronicis, Inc.<br>020488 000200US             | United States of America | UNFILED                          | P   |
| RTO<br>BXS | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | (High Density Disturb Free Virtual Ground Memory Array )<br>Bright Microelectronicis, Inc.<br>020488 000300US | United States of America | UNFILED                          | P   |
|            |          |                              | (Prevention of Write Disturb of Triple Polysilicon Source )   |                          |                                  |     |

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|------------|---------------------------------------|---|----------------------------------|---------|----------------------------|-----|
| RTO<br>BXS | 07/23/00 1 MO UNTIL DUE<br>USP-TARGET | Bright Microelectronics, Inc.<br>020488 000500US<br>(Self-Aligned Source Junction for Split Gate Non-Volatile ) | United States of America         | UNFILED | P                          |     |
| DNS<br>BXS | 07/23/00 USP-TARGET                   | Mosaic Systems, Inc.<br>020598 000100US<br>(Multi Dimension Decoding for Memory Access                          | United States of America         | UNFILED | P                          |     |
| KBD        | 07/23/00 USP-TARGET                   | University of Iowa Research Foundation<br>020618 000800US<br>(Fovea-Derived Proteins & Genes                    | United States of America         | UNFILED | P                          |     |
| GTA        | 07/23/00 1 MO UNTIL DUE<br>USP-TARGET | CareThere.com<br>020662 000400US<br>(Web-Enabled Discovery of Medical Undertreatment (Care )                    | United States of America         | UNFILED | P                          |     |
| GTA        | 07/23/00 1 MO UNTIL DUE<br>USP-TARGET | Mobilink Telecomm, Inc.<br>020669 000100US<br>(Guard Mesh for Noise Isolation in Highly Integrated )            | United States of America         | UNFILED | P                          |     |
| GTA<br>JMZ | 07/23/00 1 MO UNTIL DUE<br>USP-TARGET | Mobilink Telecomm, Inc.<br>020669 000200US<br>(Code Puncturing Method and Appartus)                             | United States of America         | UNFILED | P                          |     |

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| WMH                    | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | Philippine, Micronesia & Orien Navigat+<br>020682 000100US<br>(Housing Contained Within Container Module)    | United States of America | UNFILED                          | P   |
| KLB                    | 07/23/00 | 3 MO EXT<br>USP-RESTRICT     | The Regents of the University of CA<br>023070 090700US<br>(Methods for Altering Mass & Fertility in Plants ) | United States of America | PENDING<br>09/227421<br>01/08/99 | P   |
| KLB<br>LJH             | 07/23/00 | STATUS<br>USP-STATUS         | The Regents of the University of CA<br>023070 099100US<br>(Engineering Anbitodies that Bind Irreversibly)    | United States of America | PENDING<br>60/156194<br>09/27/99 | P   |
| Remarks: filing US/PCT |          |                              |  |                          |                                  |     |
| MHH                    | 07/23/00 | 3 MO UNTIL DUE<br>USP-TARGET | The Regents of UC<br>02307Z 076400US<br>(METABOLIC LIP PROTECTION/REPAIR PRODUCTS)                           | United States of America | UNFILED                          | P   |
| MHH<br>EGW             | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | The Regents of UC<br>02307Z 085330US<br>(Nanomolar, Non-Peptide Inhibitors of Plasmeysin)                    | United States of America | UNFILED                          | P   |
| MHH                    | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET | The Regents of UC<br>02307Z 087400US<br>(CHEMICAL ENHANCER OF NET PHOTOSYNTHESIS)                            | United States of America | UNFILED                          | P   |

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| MHH        | 07/23/00 | 1 MO UNTIL DUE<br>USP-NON PROV     | Bio-Rad Laboratories<br>02558B 062700US<br>(Extracorporeal Extraction Media for Control of Diabetes )     | United States of America | PENDING<br>60/150504<br>08/24/99 | P   |
| MHH        | 07/23/00 | 1 MONTH TO FILE<br>US-FOREIGN FILE | Bio-Rad Laboratories<br>02558B 062700US<br>(Extracorporeal Extraction Media for Control of Diabetes )     | United States of America | PENDING<br>60/150504<br>08/24/99 | P   |
| JGS        | 07/23/00 | USP-TARGET                         | Paul R. Taylor & Associates<br>086116 000000US<br>(TRAILING ARM LEAF SPRING SUSPENSION)                   | United States of America | UNFILED                          | P   |
| KBD        | 07/23/00 | 2 MO EXT<br>USP-FINAL              | Quidel Corporation<br>12046A 010500US<br>(Quantitative Lateral Flow Assays & Devices                      | United States of America | PENDING<br>08/812616<br>03/06/97 | P   |
| RCC        | 07/23/00 | USP-TARGET                         | Hitachi, Ltd.<br>16869P 009800US<br>(Computer System with a Plurality of Database Management )            | United States of America | UNFILED                          | P   |
| EGW<br>JSM | 07/23/00 | 1 MO UNTIL DUE<br>USP-NON PROV     | Regents of the Univ. of CA, Berkeley<br>18062G 002600US<br>(Non-Quinoline Inhibitors of Malaria Parasites | United States of America | PENDING<br>60/150501<br>08/24/99 | P   |

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| EGW<br>JSM | 07/23/00 | 1 MONTH TO FILE<br>US-FOREIGN FILE      | Regents of the Univ. of CA, Berkeley<br>18062G 002600US<br>(Non-Quinoline Inhibitors of Malaria Parasites)           | United States of America | PENDING<br>60/150501<br>08/24/99 | P   |
| JFH<br>HKW | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET            | Maxim Integrated Products<br>18463P 001700US<br>(Method for Reducing Metastable States in Pipelined, )               | United States of America | UNFILED                          | P   |
| CJK        | 07/23/00 | 1 MO UNTIL DUE<br>USP-TARGET            | Dan Wilson<br>20513P 000200US<br>(Object to Relational Database Mapping System)                                      | United States of America | UNFILED                          | P   |
| RCC<br>MZM | 07/24/00 | ABANDONMENT<br>USP-ISSUE FEE<br>(Final) | Hyundai Electronics Inds. Ltd.<br>000939 066700US<br>(Oxabicyclic Compounds, a Polymer-containing Said Compound, & ) | United States of America | PENDING<br>09/311488<br>05/13/99 | P   |
| MHH        | 07/24/00 | 1 MO UNTIL DUE<br>USP-TARGET            | Bio-Rad Laboratories, Inc.<br>002558 058010US<br>(SELF-ALIGNING FLOURESCENCE DETECTOR AND CAPILLARY CARTRIDGE)       | United States of America | UNFILED                          | P   |
| MHH        | 07/24/00 | 1 MO UNTIL DUE<br>USP-TARGET            | Bio-Rad Laboratories, Inc.<br>002558 060600US<br>(SPECTRAL IMAGING APPARATUS & METHODOLOGY)                          | United States of America | UNFILED                          | P   |